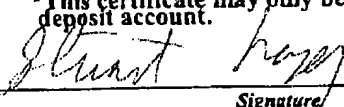


<b>TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT</b> (Under 37 CFR 1.97(b) or 1.97(c))			Docket No. <b>PH01-01-02</b>
In Re Application: <b>Andrew John Stentz</b>			
Serial No. <b>09/925,838</b>	Filing Date <b>8/8/01</b>	Examiner <b>Unassigned</b>	Group Art Unit <b>2872</b>
<b>OPTICAL AMPLIFIER HAVING AUTOMATIC GAIN CONTROL WITH IMPROVED</b>			
<b>Payment of Fee</b> (Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p))			
<input type="checkbox"/> A check in the amount of _____ is attached.			
<input type="checkbox"/> The Assistant Commissioner is hereby authorized to charge and credit Deposit Account No. _____ as described below. A duplicate copy of this sheet is enclosed.			
<input type="checkbox"/> Charge the amount of _____			
<input type="checkbox"/> Credit any overpayment.			
<input type="checkbox"/> Charge any additional fee required.			
<b>Certificate of Transmission by Facsimile*</b>		<b>Certificate of Mailing by First Class Mail</b>	
<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="text-align: center;">(Date)</div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="text-align: center;">Signature</div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="text-align: center;">Typed or Printed Name of Person Signing Certificate</div>		<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="text-align: center;">Signature of Person Mailing Correspondence</div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="text-align: center;">Typed or Printed Name of Person Mailing Certificate</div>	
<p><b>*This certificate may only be used if paying by deposit account.</b></p> <div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><div style="border-bottom: 1px solid black; height: 15px; margin-top: 5px;"></div><div style="text-align: center;">Signature</div></div><div style="width: 45%;"><p>Dated: _____</p></div></div> <p><b>Stuart H. Mayer Reg. No. 35,277</b> <b>Mayer Fortkort &amp; Williams, PC</b> <b>251 North Avenue West, 2nd Floor</b> <b>Westfield, NJ 07090</b></p> <p><b>Tel.: 908-518-7700</b></p> <p>cc:</p>			